

State of Hawaii

COMMISSION ON WATER RESOURCE MANAGEMENT Department of Land and Natural Resources

WELL COMPLETION REPORT - PART I

Well Construction

Instructions: Please print in ink or type and send completed report (with attachments, if applicable) to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96809. The Commission may not accept incomplete reports. This form shall be submitted within 60 days of the completion of work. For assistance, please consult the Hawaii Well Construction and Pump Installation Standards or call the Regulation Branch at 587-0225. For updates to this form or additional information, please visit our website at http://www.state.hi.us/dlnr/cwrm/

For C	Official	Use	Only:
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1.	State Well No.: Well Na	Well Name:		Island:			
2.	Address:	Tax Map Key:					
3.	D '''' O						
4.	If drilled, type of Rig: □ Rotary □ Percussion						
5.	5. Date Well Construction (drilled,cased,grouted) completed: Attach Driller's Log (7/26/99 DL Form)						
	In addition to the driller's log, if a geologic log was prepared, please submit with this form.						
6. Initial water-level encountered ft. below ground Date and time of measurement: month/day/year time							
7.	Step-Drawdown Test completed?	□ No □ Yes	Attach Step-Drawdown Test form (12	• •			
8.	Constant Rate Aquifer Test completed?	□ No □ Yes	Attach Constant Rate Aquifer Test fo	rm (12/17/97 CRPTD Form)			
Par	rameters prior to pump test:						
9.	Water-level:	ft. above msl	Date and time of measurement:	month/day/year time			
10.	Chloride:	ppm	Date and time of sampling:	month/day/year time			
11.	Temperature:	°F	Date and time of measurement:				
month/day/year time 12. Fill in the as-built section on the other side of this sheet.							
13. Attach plot plan and surveyor's stamped elevation report.							
 If a pump is not planned to be installed, please describe (below in the remarks section) how well is secured to prevent unauthorized access (example: lockable cover, threaded coupling, etc.) 							
15. Remarks:							
Licensed Driller (print) C-57 Lic. No							
	Signature		Date				
Surveyor (print) L.P.L.S. Lic. No							
	please attach stamped report						
	Signature		Date				
Permittee (print)							
Signature Date							

13. AS-BUILT WELL SECTION (Please attach as-built if different from diagram provided below)

